

FORMS CHECKLIST

PLEASE READ THE INSTRUCTIONS BELOW CAREFULLY **PRIOR** TO COMPLETING THE ENCLOSED SECURITY FORMS.

_____ Please submit a copy of your **resume** along with the forms listed below.

_____ **Certification for a Non-Sensitive Position**

Please print your full name under “Employee” and indicate the proposed duration of your internship. Please remember to sign the form at the bottom under “Employee.”

_____ **Volunteer Agreement (with school)**

Please print the name and title of the designated representative at your school (e.g., registrar, career services office, clinical professor); the name of your educational institution; and your name on page 1. Indicate the proposed duration of your internship on page 2 (these dates should match those on the Certification for a Non-Sensitive Position Form). You and the designated representative should sign page 3.

_____ **Volunteer Agreement**

Please review the form and sign at the bottom. Attached to this form is a copy of 28 CFR 45, as indicated in the Agreement.

_____ **Declaration for Federal Employment, OF-306**

Please review this form and respond to the questions accordingly. Should you need more space to provide a detailed explanation to any question, you may attach an additional page. Make sure that your name and Social Security Number appear on any attachments you provide. Please sign #17a on page 2 under “Applicant’s Signature.”

_____ **Disclosure and Authorization Pertaining to Consumer Reports Pursuant to the Fair Credit Reporting Act, DOJ-555**

This form authorizes the mandatory credit check that is conducted as part of the security clearance process. Please sign the form. The “Current Organization Assigned” is USDOJ, USAO, SDNY. Please be aware that for any accounts that appear on this report which are either in collection or outstanding, a detailed explanation of each item and documentation will be requested from you.

_____ **Questionnaire for Non-Sensitive Positions, SF-85 (and supplemental instructions)**

Please review this form carefully and respond to each question. If a question does not apply to you, please so state. If you use white out or make any correction on this form, you must initial the individual block in which the correction appears. If there is any information that you cannot recall, please so state.

Please don’t overlook the following questions. #7-Citizenship: All applicants must respond to question 7d-Dual

Citizenship. If you are a dual citizen with another country, state the country's name and provide an explanation as to why you maintain dual citizenship. If you are not a dual citizen, please indicate N/A under "Country." #8 and #10-Residences and Employment: You must begin with the most current information and work back 5 years from the date you sign the SF-85 form (e.g., if you signed the form 2/01/03, you must go back to 2/98). #9-Your Education: Please make sure that you include your law school in this section, along with the month/year that your JD degree is expected.

You may attached additional sheets for any information which could not be included on the form itself (e.g., three additional references). Please indicate your name and Social Security Number on any additional sheets you submit, along with the question you are responding to.

You must submit the original form and three additional copies. The original and three additional copies must bear your original signature, in blue ink, on pages 5 and 6.

_____ Dual Citizenship Statement

If you indicated in response to question #7d on the Questionnaire for Non-Sensitive Positions, SF-85, that you are a dual citizen with a foreign country, you must sign the statement on this form.

_____ Additional Data for Single Scope Background Investigations and Other Background Investigations, OFI Form 36

Please indicate in Part A, any immediate family members who are resident aliens or U.S. citizens other than by birth. If you do not know the relation code, please identify the relationship (e.g., mother, father, etc.)

Part B is for you to provide information on your current spouse if he/she is foreign-born.

Part C is for persons sharing your living quarters and others, regardless of their citizenship status.

_____ Foreign National Relatives or Associates

Please complete this form for any relative or associate who is foreign born, even if they currently possess U.S. citizenship. Any persons whom you have listed on the OFI Form 36 must be included on this form. You should indicate the individual's name, relationship to you and how often you have contact.

WHEN YOU HAVE COMPLETED ALL OF THE FORMS CONTAINED IN THIS SECURITY PACKAGE, PLEASE REVIEW THEM TO ENSURE THAT THEY HAVE BEEN COMPLETED PROPERLY AND THAT ALL OF THE INFORMATION IS ACCURATE. INCOMPLETE PACKAGES WILL CAUSE DELAYS IN THE SECURITY PROCESS.